

Write in black  
pen or ballpoint

5/21/01

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>ms</i>	<i>45</i>	<i>4/17</i>
FORMALITY REVIEW			

### INDEX OF CLAIMS

☒ Rejected      N      ☐ Non-elected  
☐ Allowed      I      ☐ Interference  
☐ (Through numeral) Canceled      A      ☐ Appeal  
☐ Restricted      O      ☐ Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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